

Fill in this information to identify your case:

United States Bankruptcy Court for the:

Eastern District of New York

Case number (if known): _____

Chapter you are filing under:

- ☒ Chapter 7
☐ Chapter 11
☐ Chapter 12
☐ Chapter 13

☐ Check if this is an
amended filing

Official Form 101**Voluntary Petition for Individuals Filing for Bankruptcy**

6/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself**About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Carlos

First name

A.

Middle name

Abadi

Last name

Suffix (Sr., Jr., II, III)

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names and any assumed, trade names and doing business as names.

Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx - xx - 7 1 6 7

OR

9 xx - xx - _____

xxx - xx - _____

OR

9 xx - xx - _____

Debtor 1

Carlos A. Abadi

First Name

Middle Name

Last Name

Case number (if known)

About Debtor 1:**About Debtor 2 (Spouse Only in a Joint Case):****4. Your Employer****Identification Number (EIN), if any.**

EIN

EIN

EIN

EIN

EIN

EIN

EIN

EIN

5. Where you live

Rikers Island Jail Complex

Number Street

19-19 Hazen Street

East Elmhurst

NY 11370

City

State

ZIP Code

Queens County

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

3438 E. Lake Road

Number Street

Suite 14, Box 643

P.O. Box

Palm Harbor

FL 34685

City

State

ZIP Code

If Debtor 2 lives at a different address:

Number Street

City

State

ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number Street

P.O. Box

City

State

ZIP Code

6. Why you are choosing this district to file for bankruptcy*Check one:*

☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.

(See 28 U.S.C. § 1408.)

Check one:

☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.

☐ I have another reason. Explain.

(See 28 U.S.C. § 1408.)

Debtor 1

Carlos A. Abadi

First Name Middle Name Last Name

Case number (if known)

Part 2: Tell the Court About Your Bankruptcy Case**7. The chapter of the Bankruptcy Code you are choosing to file under**

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☒ Chapter 7☐ Chapter 11☐ Chapter 12☐ Chapter 13**8. How you will pay the fee**

☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?☒ No☐ Yes.

District _____ When _____ Case number _____

District _____ When _____ Case number _____

District _____ When _____ Case number _____

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?☐ No☒ Yes.Debtor Barbara J. AbadiRelationship to you WifeDistrict EDNYWhen 07/11/2024 Case number, if known 24-42873

Debtor _____

Relationship to you _____

District _____

When _____ Case number, if known _____

11. Do you rent your residence?☒ No. Go to line 12.☐ Yes. Has your landlord obtained an eviction judgment against you?☐ No. Go to line 12.☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Carlos A. Abadi

First Name Middle Name Last Name

Case number (if known)

Part 3: Report About Any Businesses You Own as a Sole Proprietor**12. Are you a sole proprietor of any full- or part-time business?**☒ No. Go to Part 4.☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

Name of business, if any

Number Street

City

State

ZIP Code

Check the appropriate box to describe your business:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))☐ None of the above**13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☒ No. I am not filing under Chapter 11.☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention****14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**☒ No☐ Yes. What is the hazard?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Debtor 1

Carlos A. Abadi

First Name

Middle Name

Last Name

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
- Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
- Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:
- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.
- Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.
- ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.
- Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.
- ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ I am not required to receive a briefing about credit counseling because of:
- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

Carlos A. Abadi

First Name Middle Name Last Name

Case number (if known)

Part 6: Answer These Questions for Reporting Purposes**16. What kind of debts do you have?****16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- ☒ No. Go to line 16b.
☐ Yes. Go to line 17.

16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- ☐ No. Go to line 16c.
☒ Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.**17. Are you filing under Chapter 7?**☐ No. I am not filing under Chapter 7. Go to line 18.**Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?**☒ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

- ☒ No
☐ Yes

18. How many creditors do you estimate that you owe?

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

19. How much do you estimate your assets to be worth?

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

20. How much do you estimate your liabilities to be?

- | | | |
|--|---|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input checked="" type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Part 7: Sign Below**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Carlos A. Abadi

Signature of Debtor 1

Executed on 08/07/2024

MM / DD / YYYY

X

Signature of Debtor 2

Executed on

MM / DD / YYYY

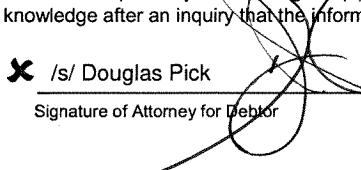
Debtor 1 Carlos A. Abadi
 First Name Middle Name Last Name

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

 /s/ Douglas Pick

Date 08/07/2024

Signature of Attorney for Debtor

MM / DD / YYYY

Douglas Pick

Printed name

Pick & Zabicki LLP

Firm name

369 Lexington Avenue

Number Street

12th Floor

New York City

NY

10017

City

State

ZIP Code

Contact phone (212) 695-6000

Email address dpick@picklaw.net

1743996

NY

Bar number

State

Debtor 1 **Carlos Abadi**
 First Name Middle Name Last Name

Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☒ Yes

7. What kind of debt do you have?

- ☐ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
☒ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$ _____

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

Total claim

From Part 4 on *Schedule E/F*, copy the following:

- | | |
|--|------------|
| 9a. Domestic support obligations (Copy line 6a.) | \$ _____ |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ _____ |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ _____ |
| 9d. Student loans. (Copy line 6f.) | \$ _____ |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ _____ |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | + \$ _____ |
| 9g. Total. Add lines 9a through 9f. | \$ _____ |

Fill in this information to identify your case and this filing:

Debtor 1 Carlos A. Abadi
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number _____
 (if known)

☐ Check if this is
 an amended
 filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2
- ☒ Yes. Where is the property?

1.1 Parera 47, 1st Floor
 Street address, if available, or other description

(1014) Buenos Aires, Argentina

City State

What is the property? Check all that apply

- ☐ Single-family home
- ☐ Duplex or multi-unit building
- ☒ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other _____

Who has an interest in the property? Check one

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ 1,750,000.00

Current value of the portion you own? \$ 1,750,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

Fee simple _____

☐ Check if this is community property

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....>

\$1,750,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☒ No
- ☐ Yes

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories
 Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
- ☐ Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....>

\$0.00

Debtor 1 Carlos A. Abadi
First Name Middle Name Last Name

Case number(if known) _____

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- ☐ No
☒ Yes. Describe...

Household goods and furnishings in New York, Florida and Argentina

\$ 25,350.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- ☐ No
☒ Yes. Describe...

Miscellaneous electronic devices

\$ 1,000.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- ☐ No
☒ Yes. Describe...

Paintings

\$ 6,250.00

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- ☒ No
☐ Yes. Describe...

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

- ☒ No
☐ Yes. Describe...

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- ☐ No
☒ Yes. Describe...

Coats and clothing in New York, Florida and Argentina

\$ 800.00

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems gold, silver

- ☐ No
☒ Yes. Describe...

2 watches and 2 cufflinks
 Wedding band

\$ 4,600.00

Debtor 1 Carlos A. Abadi
First Name Middle Name Last Name

Case number(if known) _____

13. Non-farm animals

Examples: Dogs, cats, birds, horses

- ☒ No
☐ Yes. Describe...

14. Any other personal and household items you did not already list, including any health aids you did not list

- ☒ No
☐ Yes. Give specific information...

15. Add the dollar value of the portion you own for all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here.....>

\$38,000.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- ☒ No
☐ Yes..... Cash \$ _____

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses and other similar institutions. If you have multiple accounts with the same institution, list each.

- ☐ No
☒ Yes..... Institution name:
17.1. Checking account: TD Bank (#5604) (Joint With Wife) (Restrained) \$ 9,630.91
17.2. Savings account: TD Bank (Joint With Wife) (Restrained) \$ 1,066.22

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

- ☒ No
☐ Yes.....

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

- ☒ No
☐ Yes. Give specific information about them.....

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

- ☒ No
☐ Yes. Give specific information about them.....

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- ☒ No
☐ Yes. List each account separately

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- ☒ No
☐ Yes.....

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

- ☒ No
☐ Yes.....

Debtor 1

Carlos A. Abadi

First Name Middle Name Last Name

Case number(if known)

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes.....**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**☒ No☐ Yes. Give specific information about them...**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No☐ Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No☐ Yes. Give specific information about them...**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

28. Tax refunds owed to you☒ No☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...

Federal:

\$ 0.00

State:

\$ 0.00

Local:

\$ 0.00

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No☐ Yes. Give specific information....**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No☐ Yes. Give specific information....**31. Interests in insurance policies**☒ No☐ Yes. Name the insurance company of each policy and list its value....**32. Any interest in property that is due you from someone who has died**☒ No☐ Yes. Give specific information....**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**☒ No☐ Yes. Give specific information....**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Give specific information....**35. Any financial assets you did not already list**☒ No☐ Yes. Give specific information...**36. Add the dollar value of the portion you own for all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....>**

\$10,697.13

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Debtor 1 Carlos A. Abadi
First Name Middle Name Last Name

Case number(if known) _____

37. Do you own or have any legal or equitable interest in any business-related property?

- ☐ No. Go to Part 6.
☒ Yes. Go to line 38.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

- ☐ No
☒ Yes. Describe...

Amounts owed by Village Road Show

\$ Unknown

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

- ☒ No
☐ Yes. Describe...

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

- ☒ No
☐ Yes. Describe...

41. Inventory

- ☒ No
☐ Yes. Describe...

42. Interests in partnerships or joint ventures

- ☒ No
☐ Yes. Describe.....

43. Customer lists, mailing lists, or other compilations

- ☒ No
☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

44. Any business-related property you did not already list

- ☒ No
☐ Yes. Give specific information

45. Add the dollar value of the portion you own for all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....>

\$0.00

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- ☒ No
☐ Yes. Give specific information...

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$0.00

Debtor 1 Carlos A. Abadi
 First Name Middle Name Last Name

Case number(if known) _____

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2.....>			\$ 1,750,000.00
56. Part 2: Total vehicles, line 5	\$ 0.00		
57. Part 3: Total personal and household items, line 15	\$ 38,000.00		
58. Part 4: Total financial assets, line 36	\$ 10,697.13		
59. Part 5: Total business-related property, line 45	\$ 0.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$ 0.00		
61. Part 7: Total other property not listed, line 54	+ \$ 0.00		
62. Total personal property. Add lines 56 through 61	\$ 48,697.13	Copy personal property total>	+ \$ 48,697.13
63. Total of all property on Schedule A/B. Add line 55 + line 62			\$ 1,798,697.13

Fill in this information to identify your case:

Debtor 1	Carlos A. Abadi		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Eastern District of New York			
Case number (If known)			

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: Household Goods - Household goods and furnishings in New York, Florida and Argentina Line from <i>Schedule A/B</i> : 6	\$ 25,350.00	<input checked="" type="checkbox"/> \$ 11,375.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NY CPLR § 5205
Brief description: Electronics - Miscellaneous electronic devices Line from <i>Schedule A/B</i> : 7	\$ 1,000.00	<input checked="" type="checkbox"/> \$ 1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NY CPLR § 5205
Brief description: Collectibles Of Value - Paintings Line from <i>Schedule A/B</i> : 8	\$ 6,250.00	<input checked="" type="checkbox"/> \$ 1,175.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NY CPLR § 5205

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor

Carlos A. Abadi

First Name

Middle Name

Last Name

Case number (if known)

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Line from Schedule A/B: 11 Brief description: Clothing - Coats and clothing in New York, Florida and Argentina	\$ 800.00	<input checked="" type="checkbox"/> \$ 800.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NY CPLR § 5205(a)(5)
Line from Schedule A/B: 11 Brief description: Jewelry - 2 watches and 2 cufflinks	\$ 2,600.00	<input checked="" type="checkbox"/> \$ 1,175.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NY CPLR § 5205
Line from Schedule A/B: 12 Brief description: Jewelry - Wedding band	\$ 2,000.00	<input checked="" type="checkbox"/> \$ 2,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	NY CPLR § 5205
Line from Schedule A/B: 12 Brief description: TD Bank (#5604) (Joint With Wife) (Restrained) (Checking Account)	\$ 9,630.91	<input checked="" type="checkbox"/> \$ 9,630.91 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.Y. Debt. & Cred. Law § 282 (2)(a)
Line from Schedule A/B: 17.1 Brief description: TD Bank (Joint With Wife) (Restrained) (Savings Account)	\$ 1,066.22	<input checked="" type="checkbox"/> \$ 1,066.22 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	N.Y. Debt. & Cred. Law § 282 (2)(a)
Line from Schedule A/B: 17.2 Brief description:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$	<input type="checkbox"/> \$ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your case:

Debtor 1 Carlos A. Abadi
First Name Middle Name Last Name

Debtor 2 _____
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number _____
 (if known)

☐ Check if this is
an amended
filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A
Amount of
claim Do not
deduct the value
of collateral.

Column B
Value of
collateral that
supports this
claim

Column C
Unsecured
portion If any

2.1

Describe the property that secures the claim: \$ 131,872.00 \$ 10,697.13 \$ 121,174.87

Brown Rudnick LLP

Creditor's Name

7 Times Square

Number

Street

New York NY 10036

City

State

ZIP Code

Who owes the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another

☐ Check if this claim relates to a
community debt

Date debt was incurred _____

As of the date you file, the claim is: Check all
that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Nature of lien. Check all that apply.

☐ An agreement you made (such as mortgage or
secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☒ Judgment lien from a lawsuit☐ Other (including a right to offset) _____

Last 4 digits of account number

Joint Checking and Savings Accounts at TD Bank - \$10,697.13

Debtor Carlos A. Abadi
First Name Middle Name Last Name

Case number(if known) _____

2.2Describe the property that secures the claim: \$ 4,000.00 \$ 1,750,000.00 \$ 0.00

Portela Administracion

Creditor's Name

J.A. Pacheco De Melo 1827, 20

Number

Street
Second Floor

(1126) Buenos Aires, Argentina

City

State

ZIP Code

Who owes the debt? Check one.☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim relates to a
community debt

Date debt was incurred _____

Parera 47, 1st Floor, (1014) Buenos Aires, Argentina, -
\$1,750,000.00 Maintenance Arrears**As of the date you file, the claim is:** Check all
that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☒ An agreement you made (such as mortgage or
secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☐ Other (including a right to offset) _____**Last 4 digits of account number**

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 135,872.00**Part 2:** List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this information to identify your case:

Debtor 1 Carlos A. Abadi
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing)
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number
 (if know)

☐ Check if this is
 an amended
 filing

Official Form 106E/F**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.
- ☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.1

Internal Revenue Service

Priority Creditor's Name

Centralized Insolvency Operations

Number Street

P.O. Box

Philadelphia PA 19101

City State ZIP Code

Who owes the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim relates to a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number**When was the debt incurred?** 2023

\$ 8,780.56

\$ 8,780.56

\$ 0.00

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
- ☒ Taxes and certain other debts you owe the government
- ☐ Claims for death or personal injury while you were intoxicated
- ☐ Other. Specify

Debtor Carlos A. Abadi
 First Name Middle Name Last Name

Case number(if known) _____

2.2

NYC Dept. of Finance

Priority Creditor's Name

66 John Street

Number Street

2nd Floor, Legal Dept.

New York NY 10038

City State ZIP Code

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

\$ 20,855.00 \$ 20,855.00 \$ 0.00

When was the debt incurred? 2021

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

Debtor Carlos A. Abadi
First Name Middle Name Last Name

Case number(if known) _____

Part 1: Your PRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim	Priority amount	Nonpriority amount
-------------	-----------------	--------------------

2.3

NYS Dept. of Taxation and Finance

Priority Creditor's Name

Bankruptcy/Special Procedures Section

Number Street
P.O. Box 5300

Albany NY 12205

City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

When was the debt incurred? 2020

\$ 36,349.00	\$ 36,349.00	\$ 0.00
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As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

2.4

NYS Dept. of Taxation and Finance

Priority Creditor's Name

Bankruptcy/Special Procedures Section

Number Street
P.O. Box 5300

Albany NY 12205

City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

When was the debt incurred? 2021

\$ 64,671.00	\$ 64,971.00	\$ -300.00
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As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☒ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

Part 2: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing else to report in this part. Submit to the court with your other schedules.
☒ Yes. Fill in all of the information below.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Debtor Carlos A. Abadi
First Name Middle Name Last Name

Case number(if known) _____

4.1	Affirm Nonpriority Creditor's Name <u>650 California Street</u> Number Street <u>Floor 12</u> <u>San Francisco CA 94108</u> City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify	\$ 1,886.00
4.2	Apple MasterCard Nonpriority Creditor's Name <u>Goldman Sachs</u> Number Street <u>Lockbox 6112, P.O. Box 7247</u> <u>Philadelphia PA 19170</u> City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify	\$ 6,516.00
4.3	CapitalOne Nonpriority Creditor's Name <u>P.O. Box 71087</u> Number Street <u>Charlotte NC 28272</u> City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? _____ As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt	\$ 3,086.00

Debtor

Carlos A. Abadi

First Name Middle Name Last Name

Case number(if known)

4.4

Conor and Eavan O'Driscoll

Nonpriority Creditor's Name

355 Locust Avenue

Number Street
Rye NY 10580

City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim relates to a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number

\$ 45,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Personal Loan

4.5

Estate of Jose Abadi

Nonpriority Creditor's Name

Number Street
Buenos Aires, Argentina

City State ZIP Code

Who owes the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this claim relates to a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number

\$ 7,000,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify

4.6

Francis Guthman

Nonpriority Creditor's Name

Juan Francisco Segui 4400, 17B

Number Street
(1425) Buenos Aires, Argentina

City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another
- ☐ Check if this claim relates to a community debt

Is the claim subject to offset?

- ☒ No
- ☐ Yes

Last 4 digits of account number

\$ 25,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Personal Loans

Debtor

Carlos A. Abadi

First Name Middle Name Last Name

Case number(if known)

4.7	Harvey Tepner Nonpriority Creditor's Name 11 Fifth Avenue, #8-L Number Street New York NY 10003 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify	\$ 33,700.00
4.8	Honeedew Investing LLC Nonpriority Creditor's Name c/o Medina Law Firm LLC Number Street 641 Lexington Ave., 13th Fl. City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Judgment plus interest from 5/17/17	\$ 8,414,046.00
4.9	Jet Blue Barclays MasterCard Nonpriority Creditor's Name P.O. Box 13337 Number Street Philadelphia PA 19101 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify	\$ 2,433.00

Debtor Carlos A. Abadi
 First Name Middle Name Last Name

Case number(if known) _____

4.10 Liston Abramson LLP
 Nonpriority Creditor's Name
405
 Number Street
46th Floor
New York NY 10174
 City State ZIP Code
Who owes the debt? Check one.
☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number
When was the debt incurred? _____
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Legal Fees

\$ 235,196.29

4.11 Moffitt Cancer Center
 Nonpriority Creditor's Name
c/o Access One
 Number Street
P.O. Box 410806
Charlotte NC 28241
 City State ZIP Code
Who owes the debt? Check one.
☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim relates to a community debt
Is the claim subject to offset?
☒ No
☐ Yes

Last 4 digits of account number
When was the debt incurred? _____
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
Type of NONPRIORITY unsecured claim:
☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify Medical Services

\$ 1,518.00

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

NYS Dept. of Taxation and Finance
 Creditor's Name
Civil Enforcement Division
 Number Street
WA Harriman Campus
12277
 City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.3 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured

Last 4 digits of account number

NYS Dept. of Taxation and Finance
 Creditor's Name
Civil Enforcement Division
 Number Street
Albany NY 12227
 City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.4 of (Check one): ☒ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number

Debtor

Carlos A. Abadi

First Name Middle Name Last Name

Case number(if known)

Penn Credit Corp.

Creditor's Name

2800 Commerce Drive

Number Street

Harrisburg PA 17110

City

State

ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 2.2 of (Check one):☒ Part 1: Creditors with Priority Unsecured Claims☐ Part 2: Creditors with Nonpriority Unsecured

Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claim

Total claims from Part 1

6a. Domestic support obligations

6a. \$ 0.00

6b. Taxes and certain other debts you owe the government

6b. \$ 130,655.56

6c. Claims for death or personal injury while you were intoxicated

6c. \$ 0.00

6d. Other. Add all other priority unsecured claims. Write that amount here.

6d. \$ 0.00

6e. Total. Add lines 6a through 6d.

6e. \$ 130,655.56

Total claim

Total claims from Part 2

6f. Student loans

6f. \$ 0.00

6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims

6g. \$ 0.00

6h. Debts to pension or profit-sharing plans, and other similar debts

6h. \$ 0.00

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6i. \$ 15,768,381.29

6j. Total. Add lines 6f through 6i.

6j. \$ 15,768,381.29

Fill in this information to identify your case:

Debtor 1 Carlos A. Abadi
First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing)
First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number
 (if know)

☐ Check if this is
an amended
filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☐ No
☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No. Go to line 3.
☐ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Barbara Abadi
 Name
3438 E. Lake Road Suite 14, Box 643
 Street
Palm Harbor FL 34685
 City State ZIP Code

- ☐ Schedule D, line ____
☒ Schedule E/F, line 2.3
☐ Schedule G, line ____

3.2

Barbara Abadi
 Name
3438 E. Lake Road Suite 14, Box 643
 Street
Palm Harbor FL 34685
 City State ZIP Code

- ☐ Schedule D, line ____
☒ Schedule E/F, line 2.4
☐ Schedule G, line ____

3.3

Barbara Abadi
 Name
3438 E. Lake Road Suite 14, Box 643
 Street
Palm Harbor FL 34685
 City State ZIP Code

- ☒ Schedule D, line 2.1
☐ Schedule E/F, line ____
☐ Schedule G, line ____

3.4

Barbara Abadi
 Name
3438 E. Lake Road Suite 14, Box 643
 Street
Palm Harbor FL 34685
 City State ZIP Code

- ☐ Schedule D, line ____
☒ Schedule E/F, line 4.4
☐ Schedule G, line ____

Debtor

Carlos A. Abadi

First Name Middle Name Last Name

Case number(if known)

3.5

Barbara Abadi

Name

3438 E. Lake Road Suite 14, Box 643

Street

Palm Harbor

FL

34685

City

State

ZIP Code

☐ Schedule D, line _____☒ Schedule E/F, line 4.6☐ Schedule G, line _____

3.6

Barbara Abadi

Name

3438 E. Lake Road Suite 14, Box 643

Street

Palm Harbor

FL

34685

City

State

ZIP Code

☐ Schedule D, line _____☒ Schedule E/F, line 4.8☐ Schedule G, line _____

3.7

Barbara Abadi

Name

3438 E. Lake Road Suite 14, Box 643

Street

Palm Harbor

FL

34685

City

State

ZIP Code

☐ Schedule D, line _____☒ Schedule E/F, line 4.10☐ Schedule G, line _____

Debtor 1 **Carlos A. Abadi**
 First Name Middle Name Last Name

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here → 4.	\$ 0.00	\$ 0.00
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	\$ 0.00	\$ 0.00
5b. Mandatory contributions for retirement plans	\$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	\$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	\$ 0.00	\$ 0.00
5e. Insurance	\$ 0.00	\$ 0.00
5f. Domestic support obligations	\$ 0.00	\$ 0.00
5g. Union dues	\$ 0.00	\$ 0.00
5h. Other deductions. Specify: _____	\$ 0.00	\$ 0.00
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	\$ 0.00	\$ 0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	\$ 0.00	\$ 0.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	\$ 0.00	\$ 0.00
8b. Interest and dividends	\$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	\$ 0.00	\$ 0.00
8d. Unemployment compensation	\$ 0.00	\$ 0.00
8e. Social Security	\$ 2,807.00	\$ 0.00
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	\$ 0.00	\$ 0.00
8g. Pension or retirement income	\$ 0.00	\$ 0.00
8h. Other monthly income. Specify: See continuation page attached	\$ 5,000.00	\$ 0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	\$ 7,807.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$ 7,807.00	\$ 0.00
11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: _____		\$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies		\$ 7,807.00
13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain: _____		Combined monthly income

Debtor 1 Carlos A. Abadi
First Name Middle Name Last Name

Case number (if known) _____

Continuation Sheet for Official Form 106I

8h. Other Monthly Income:

Payments From Village Road Show for Past Services (Debtor) \$5,000.00

Fill in this information to identify your case:

Debtor 1 Carlos A. Abadi
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York
 (State)

Case number
 (If known) _____

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J**Schedule J: Your Expenses**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household**1. Is this a joint case?**

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☒ No

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.**If not included in line 4:**

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

Your expenses

4. \$ 1,100.00

4a. \$ 100.00

4b. \$ 0.00

4c. \$ 250.00

4d. \$ 0.00

Debtor 1

Carlos A. Abadi

First Name Middle Name Last Name

Case number (if known)

Your expenses

5. Additional mortgage payments for your residence , such as home equity loans	5.	\$	<u>0.00</u>
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	<u>241.00</u>
6b. Water, sewer, garbage collection	6b.	\$	<u>9.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	<u>150.00</u>
6d. Other. Specify: _____	6d.	\$	<u>0.00</u>
7. Food and housekeeping supplies	7.	\$	<u>400.00</u>
8. Childcare and children's education costs	8.	\$	<u>0.00</u>
9. Clothing, laundry, and dry cleaning	9.	\$	<u>100.00</u>
10. Personal care products and services	10.	\$	<u>200.00</u>
11. Medical and dental expenses	11.	\$	<u>200.00</u>
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	<u>50.00</u>
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	<u>0.00</u>
14. Charitable contributions and religious donations	14.	\$	<u>0.00</u>
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	<u>0.00</u>
15b. Health insurance	15b.	\$	<u>0.00</u>
15c. Vehicle insurance	15c.	\$	<u>0.00</u>
15d. Other insurance. Specify: _____	15d.	\$	<u>0.00</u>
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>NYS Taxes Per Payment Plan</u>	16.	\$	<u>750.00</u>
17. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	<u>0.00</u>
17b. Car payments for Vehicle 2	17b.	\$	<u>0.00</u>
17c. Other. Specify: _____	17c.	\$	<u>0.00</u>
17d. Other. Specify: _____	17d.	\$	<u>0.00</u>
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	<u>0.00</u>
19. Other payments you make to support others who do not live with you. Specify: _____	19.	\$	<u>0.00</u>
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.			
20a. Mortgages on other property	20a.	\$	<u>0.00</u>
20b. Real estate taxes	20b.	\$	<u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c.	\$	<u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d.	\$	<u>0.00</u>
20e. Homeowner's association or condominium dues	20e.	\$	<u>0.00</u>

Debtor 1 Carlos A. Abadi
First Name Middle Name Last Name

Case number (if known) _____

21. **Other.** Specify: Housekeeper

Mailbox Rental

21. +\$ 300.00
 +\$ 20.00
 +\$ _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 3,870.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.

22b. \$ _____

22c. \$ 3,870.00

23. Calculate your monthly net income.

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 7,807.00

23b. Copy your monthly expenses from line 22c above.

23b. -\$ 3,870.00

23c. Subtract your monthly expenses from your monthly income.
 The result is your *monthly net income*.

23c. \$ 3,937.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 Carlos A. Abadi
First Name Middle Name Last NameDebtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Eastern District of New York

Case number _____
(If known)☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Carlos A. Abadi

Signature of Debtor 1

Date 08/07/2024
MM / DD / YYYY**X**

Signature of Debtor 2

Date _____
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1 Carlos A. Abadi
 First Name Middle Name Last Name

Debtor 2
 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of New York

Case number _____
 (if known)

☐ Check if this is
 an amended
 filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before**1. What is your current marital status?**

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☐ No
☒ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:**Dates Debtor 1
lived there****Debtor 2:****Dates Debtor 2
lived there**

40 East 78th Street

Number Street
 New York NY 10128

City State ZIP Code

From 10/01/2020
 To 10/31/2021

☐ Same as Debtor 1☐ Same as Debtor 1

From _____
 To _____

Number Street

City State ZIP Code

☐ Same as Debtor 1☐ Same as Debtor 1

From _____
 To _____

Number Street

City State ZIP Code

☐ Same as Debtor 1☐ Same as Debtor 1

From _____
 To _____

Number Street

City State ZIP Code

202 South Parker, #384

Number Street
 Tampa FL 33606

City State ZIP Code

From 11/01/2021
 To 11/30/2022

Parera 47, 1st Floor

Number Street
 Buenos Aires, (1014) Argentina

City State

ZIP Code

From 01/01/1998
 To 08/07/2024

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☒ No
☐ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H)

Part 2: Explain the Sources of Your Income**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

Debtor Carlos A. Abadi
First Name Middle Name Last Name

Case number(if known) _____

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
- ☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply	Sources of income Check all that apply
	Gross income (before deductions and exclusions)	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips \$ <u>15,000.00</u> <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips \$ _____ <input type="checkbox"/> Operating a business
For last calendar year: (January 1 to December 31, <u>2023</u>)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips \$ <u>62,500.00</u> <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips \$ _____ <input type="checkbox"/> Operating a business
For the calendar year before that: (January 1 to December 31, <u>2022</u>)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips \$ <u>240,783.00</u> <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips \$ _____ <input type="checkbox"/> Operating a business

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No
- ☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Describe below.	Sources of income Describe below.
	Gross income from each source (before deductions and exclusions)	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	_____	_____
For last calendar year: (January 1 to December 31, <u>2023</u>)	Personal Loan	_____
For the calendar year before that: (January 1 to December 31, <u>2022</u>)	_____	_____

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☒ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$7,575* or more?

- ☒ No. Go to line 7.

- ☐ Yes. List below each creditor to whom you paid a total of \$7,575* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.

Debtor Carlos A. Abadi
First Name Middle Name Last Name

Case number(if known) _____

☐ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**
 During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? *Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.*

☒ No.

☐ Yes. List all payments to an insider.

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

☒ No.

☐ Yes. List all payments that benefited an insider.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No

☒ Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
Case title: Brown Rudnick LLP v. Barbara Abadi, et al. Case number: <u>24002927-CV-32</u>	Debt Collection Florida Circuit Court Court Name Miami Dade County Number Street City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
Case title: Honeedew Investing Limited v. Carlos Abadi and Barbara Abadi Case number: <u>652654/2017</u>	Post-Judgment Enforcement/Collection Supreme Court of the State of NY Court Name New York County Number Street City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

☐ No. Go to line 11.

☒ Yes. Fill in the information below.

Describe the property	Date	Value of the property
10% Garnishment of 2024 Income Explain what happened <input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input checked="" type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.	<u>01/2024</u>	\$ <u>Unknown</u>
Honeedew Investing LLC Creditor's Name c/o Medina Law Firm LLC Number Street 641 Lexington Ave., 13th Fl. New York NY 10022 City State ZIP Code		

Debtor Carlos A. Abadi
 First Name Middle Name Last Name

Case number(if known) _____

Brown Rudnick LLP

Creditor's Name

7 Times Square

Number Street

New York NY 10036

City

State

ZIP Code

Describe the property

Restraint on Joint Checking and Savings Accounts at TD Bank

Date

06/2024

Value of the property

\$ 10,697.13

Explain what happened

☐ Property was repossessed.

☐ Property was foreclosed.

☐ Property was garnished.

☒ Property was attached, seized, or levied.

Describe the property

Attachment Against Apartment in Buenos Aires, Argentina

Date

01/2024

Value of the property

\$ 1,750,000.00

Honeedew Investing LLC

Creditor's Name

c/o Medina Law Firm LLC

Number Street

641 Lexington Ave., 13th Fl.

New York NY 10022

City

State

ZIP Code

Explain what happened

☐ Property was repossessed.

☐ Property was foreclosed.

☐ Property was garnished.

☒ Property was attached, seized, or levied.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

☒ No

☐ Yes. Fill in the details

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court appointed receiver, a custodian, or another official?

☒ No

☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☐ No

☒ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person

Describe the gifts

Dates you gave the gifts

Value

Wedding Gift

05/2023

\$ 5,000.00

Mr. and Mrs. Joseph Abadi

Person to Whom You Gave the Gift

Number

Street

City State ZIP Code

Person's relationship to you

Son and Daughter-in-Law

Gifts with a total value of more than \$600 per person

Describe the gifts

Dates you gave the gifts

Value

Vacuum Cleaner and Other Small Gifts

05/2023

\$ 1,500.00

Mr. and Mrs. Joseph Abadi

Person to Whom You Gave the Gift

Number

Street

City State ZIP Code

Person's relationship to you

Son and Daughter-in-Law

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☐ No

☒ Yes. Fill in the details for each gift or contribution.

Debtor Carlos A. Abadi
 First Name Middle Name Last Name

Case number(if known) _____

Gifts or contributions to charities that total more than 600

Describe what you contributed

Date you contributed
10/2023

Value
 \$ 1,200.00

Israeli Defense Fund
 Charity's Name

Number Street

City State ZIP Code

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

- ☒ No
☐ Yes. Fill in the details.

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

Description and value of any property transferred

Date payment or transfer was made Amount of payment

\$7,500 Flat Fee for Chapter 7 - \$12,500 Refundable Retainer for Contested Matters (If Any)

\$ 20,000.00
 \$ _____

Pick ☐ Zabicki LLP

Person Who Was Paid

369 Lexington Avenue

Number Street
 New York NY 10017

City State ZIP Code

Email or website address
 Harvey Tepner

Person Who Made the Payment, if Not You

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self settled trust or similar device of which you are a beneficiary?(These are often called asset-protection devices.)

- ☒ No
☐ Yes. Fill in the details.

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

Debtor Carlos A. Abadi
 First Name Middle Name Last Name

Case number(if known) _____

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts certificates of deposit shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
☐ Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
☐ Yes. Fill in the details.

Part 9: Identify Property You Own or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
☐ Yes. Fill in the details.

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No
☐ Yes. Fill in the details.

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation
☒ No. None of the above applies. Go to Part 12.
☐ Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Debtor Carlos A. Abadi
First Name Middle Name Last Name

Case number(if known) _____

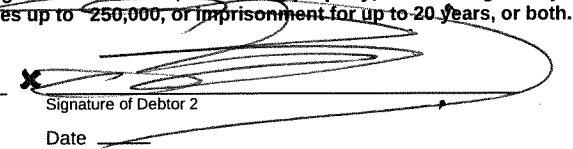
- ☒ No. None of the above applies. Go to Part 12.
- ☐ Yes. Check all that apply above and fill in the details below for each business.

Debtor Carlos A. Abadi
 First Name Middle Name Last Name

Case number(if known) _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.


 X /s/ Carlos A. Abadi
 Signature of Debtor 1

Signature of Debtor 2

Date 08/07/2024

Date _____

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Debtor Carlos A. Abadi

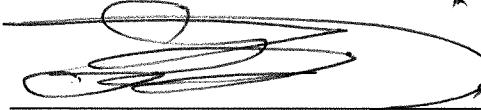
Case number(if known) _____

Part 3: Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

✕ /s/ Carlos A. Abadi
Signature of Debtor 1

Date 08/07/2024
MM/DD/YYYY

✕ 
Signature of Debtor 2

Date 08/07/2024
MM/DD/YYYY

Debtor 1

Carlos A. Abadi

First Name Middle Name Last Name

Case number (if known)

Column A
Debtor 1Column B
Debtor 2 or
non-filing spouse**8. Unemployment compensation**Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: \downarrow

For you \$

For your spouse \$

- 9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$

\$

- 10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

\$

\$

\$

\$

+ \$

+ \$

Total amounts from separate pages, if any.

- 11. Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$

+ \$

= \$

Total current
monthly income**Part 2: Determine Whether the Means Test Applies to You**

- 12. Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11. Copy line 11 here \rightarrow \$

Multiply by 12 (the number of months in a year).

x 12

12b. The result is your annual income for this part of the form.

12b.

\$

- 13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

Fill in the number of people in your household.

Fill in the median family income for your state and size of household. 13.

\$

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

14. How do the lines compare?

- 14a. ☐ Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.* Go to Part 3. Do NOT fill out or file Official Form 122A-2.

- 14b. ☐ Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.* Go to Part 3 and fill out Form 122A-2.

Debtor 1

Carlos A. Abadi

First Name Middle Name Last Name

Case number (if known)

Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

X /s/ Carlos A. Abadi

Signature of Debtor 1

Date 08/07/2024

MM / DD / YYYY

X

Signature of Debtor 2

Date

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

Eastern District of New York

In re Carlos A. Abadi

Case No. _____

Debtor

Chapter 7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

☒ FLAT FEE

For legal services, I have agreed to accept \$ 7,500.00
 Prior to the filing of this statement I have received. \$ 0.00
 Balance Due. \$ 7,500.00

☒ RETAINER

For legal services, I have agreed to accept a retainer of \$ 12,500.00
 The undersigned shall bill against the retainer at an hourly rate of \$ 515.00
 [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

REFUNDABLE
 RETAINER
 FOR CONTESTED
 MATTERS, IF ANY

2. The source of the compensation paid to me was:

☐ Debtor ☒ Other (specify) Harvey Tepner

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the Agreement, together with a list of the names of the people sharing the compensation is attached.

5. In return of the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:
Representation of the Debtor in adversary proceedings and other contested bankruptcy matters.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

08/07/2024

/s/ Douglas Pick, 1743996

Date

Signature of Attorney

Pick & Zabicki LLP

Name of law firm
369 Lexington Avenue
12th Floor
New York City, NY 10017

United States Bankruptcy Court
Eastern District of New York

In re: Carlos A. Abadi

Case No.

Debtor(s)

Chapter 7

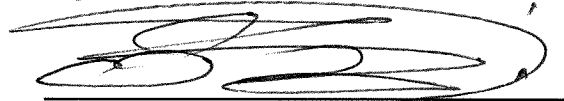
Verification of Creditor Matrix

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 08/07/2024

/s/ Carlos A. Abadi

Signature of Debtor

A handwritten signature in black ink, appearing to be 'Carlos A. Abadi', written over a horizontal line.

Signature of Joint Debtor

Affirm
650 California Street
Floor 12
San Francisco, CA 94108

Jet Blue Barclays MasterCard
P.O. Box 13337
Philadelphia, PA 19101

Apple MasterCard
Goldman Sachs
Lockbox 6112, P.O. Box 7247
Philadelphia, PA 19170

Liston Abramson LLP
405
46th Floor
New York, NY 10174

Barbara Abadi
3438 E. Lake Road
Suite 14, Box 643
Palm Harbor, FL 34685

Mail Room
3438 East Lake Road
Suite 14
Palm Harbor, FL 34685

Brown Rudnick LLP
7 Times Square
New York, NY 10036

Moffitt Cancer Center
c/o Access One
P.O. Box 410806
Charlotte, NC 28241

CapitalOne
P.O. Box 71087
Charlotte, NC 28272

NYC Dept. of Finance
66 John Street
2nd Floor, Legal Dept.
New York, NY 10038

Conor and Eavan O'Driscoll
355 Locust Avenue
Rye, NY 10580

NYC Law Dept.
100 Church Street
New York, NY 10007

Estate of Jose Abadi
Buenos Aires, Argentina,

NYS Attorney General
28 Liberty Street
New York, NY 10005

Francis Guthman
Juan Francisco Segui 4400, 17B

NYS Dept. of Labor
WA Harriman Campus
Building 12, #256
Albany, NY 12240

Harvey Tepner
11 Fifth Avenue, #8-L
New York, NY 10003

Honeedew Investing LLC
c/o Medina Law Firm LLC
641 Lexington Ave., 13th Fl.
New York, NY 10022

NYS Dept. of Taxation and Finance
Bankruptcy/Special Procedures Section
P.O. Box 5300
Albany, NY 12205

Internal Revenue Service
Centralized Insolvency Operations
P.O. Box
Philadelphia, PA 19101

NYS Dept. of Taxation and Finance
Civil Enforcement Division
WA Harriman Campus

Internal Revenue Service
P.O. Box 7346
Philadelphia, PA 19101-7346

NYS Dept. of Taxation and Finance
Civil Enforcement Division
Albany, NY 12227

NYS Dept. of Taxation and Finance
Bankruptcy/Special Procedures Section
P.O. Box 5300
Albany, NY 12205-0300

NYS Unemployment Insurance Fund
P.O. Box 551
Albany, NY 12201

Office of the U.S. Trustee
201 Varick Street, Suite 1006
New York, NY 10014

Penn Credit Corp.
2800 Commerce Drive
Harrisburg, PA 17110

Pick & Zabicki LLP
369 Lexington Avenue
12th Floor
New York, NY 10017

Portela Administracion
J.A. Pacheco De Melo 1827, 20
Second Floor

U.S. Dept. of Justice
Box 55
Washington, DC 20044

United States Attorney
One St. Andrews Plaza
Claims Unit
New York, NY 10007